1 1 2 1 3 1 4 4 5 5 5 5 5 5 5 5 6 5 6 6 6 6 6 6 6 6	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT  1691971    INTERSTATE	1 1 7 27 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
6 1	LAST NAME JACOBSON FIRST NAME ANNA MIDDLE E  STREET 2712 SOPER HILL RD	
7	GITY LAKE STEVENS ST. WA ZIF 98258	1 1 2 31
8	COL BESTRICTIONS ENDOPSEMENTS	2
9 9	DRIVER'S JACOBAE050KD STATE WA SEX F DIO B 05 _ 04 _ 1995	3
10 9	ON DUTY STATUS AIREAG 2 RESTR. 4 EJECT 1 HELMET NJURY 1 CLASS 1	1 1 2 32
11 2 5	LICENSE ADC2143 STATE WA VINA 2HGFA1F54BH537714	2 <u> </u>
12 2 5	TRAILER STATE STATE STATE	* <u> </u>
13 2	VEH. YEAR 2011 MAKE HOND MODEL CIVIC STYLE 4D VEHICLE TOWED BY GOVT, VEHICLE TOWED BY  REGISTERED OWNER INFO. ALASKA USA PO BOX 196613 ANCHORAGE AK 93519  VEHICLE NO. 1	3 6 33
14 2	REGISTERED OWNER INFO. ALASKA USA PO BOX 196613 ANCHORAGE AK 99519  VEHICLE NO. 1 SHADE IN DAMAGED AREA  LIABILITY INSURANCE O PEMCO CA1251032  INSURANCE O PEMCO CA1251032	FROM TO 5 1 34
15 2	VEHICLE YES INC CITATION # CHARGE  CHARGE  TO BOTTOM  7 6	
16 2	UNIT 02 VEHICLE V CYCLE D PEDESTRIAN DOWNER VEST NO D: 4253772853	4 35
17	LAO I I VAVICE NITIAL N	37
18	STREET 1201 104TH DR SE  LAKE STEVENS  WA 98258	38
	Set 2/17 state of the set of the	39
19	CODE RESTRICTIONS ENGINEERITS ENGINEERITS WA STUM D.O.B. 04 29 1958	40
20	LICENSE #   WASDYYOU  -  -	
21	ON DUTY STATUS AIRBAG RESTR. SELECT USE CLASS	
22	LICENSE PLATE # AGH4844 STATE WA VINH JHMES95605S010569	
23	TRAILER PLATE TRAILER PLATE TRAILER PLATE TOWER BY STATE  VEH. YEAR 2005 MAKE HOND MODEL CIVIC STYLE 47 VEHICLE TOWER BY GOYT-VEHICLE.	1 41
24	VEH. YEAR 2005 MAKE HOND MODEL CIVIC STYLE 4T VEHICLE TOWED BY TOWED BY GOVERNMENT INFO. OWNED BY DRIVER  REGISTERED OWNER INFO. OWNED BY DRIVER  VEHICLE NO. 2 SHADEHY DAMAGES AREA	1 42
	UABILITY INSURANCE INSURANCE ON HARTFORD CAUSUALTY 55PHL249362-219050 8 POLICY # 9 TOP 5	
25	VEHICLE YES NO CITATION # CHARGE  CHAR	
26	PART A 3000-345-159 R (7/06)	





POLICE TRAFFIC COLLISION REPORT		CORRECTION	REPORT NO.	E257	7201		
1591972		CASE# 13-01716		•			
NAME (AC	ADDITIONAL PERSONS INVO	DLVED (PASSENGERS AND/O	R WITNESSES ONLY)				
(LAST, FIRST, MIDDLE INITIAL)	OBSON GRACE						
ADDRESS & PHONE # 2712 SOPER HILL R	RD LAKE STEVENS WA 4253207126		SEX F D.O.B.	2 -	02 - 2002		
PASSENGER WITHESS UNIT #	1 SEAT 3 AIRBAG	2 RESTR 4 EJECT	1 HELMET INJUR CLASS	1	NATURE OF INJURIES		
NAME (LAST, FIRST, MIDDLE INITIAL) LEW	NS JEREMY	No. of the last of					
ADDRESS & PHONE # 1201 104TH DR SE	LAKE STEVENS WA 98258 4253772	853	SEX M D.O.B. OR	6 _	24 _ 200	2	
PASSENGER WITHESS UNIT #	2 SEAT 11 AIRBAG	2 RESTR. 4 EJECT 1	HELMET INJUR USE CLASS	1	NATURE OF INJURIES		
NAME (CAST, FIRST, MIDDLE INITIAL) LE	WIS THOMAS						
ADDRESS & PHONE * 1201 104TH DR SE	LAKE STEVENS WA 4253772853		SEX M D.O.B. 1:	1 _	24 _ 200	0	
PASSENGER WITNESS UNIT #	2 SEAT 11 AIRBAG	2 RESTR. 4 EJECT 1	HELMET INJUR USE CLASS	1	NATURE OF INJURIES		
Harmolenier over 1900 gerage op 1996. Perchanische Station of 1987 gerage		NARRATIVE					
Unit #2 was traveling northbound on Frontage Rd and was stuck on the passenger side by Unit #1 who had just pulled out of Chevron, making a left turn out of the parking lot. There was a vehicle parked on the northbound shoulder obstructing some of the veiw from Unit #1.							
Unit #2 sustained repo	rtable right passenger	damage.					

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

BOB SUMMERS		07-16-13 04:56 PM		
INVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST. DET	DATED	PLACE SIGNED	
APPROVED BY	D.	ATE		
BOB SUMMERS 079	7/17/2013 2:32:10 PM			
BADGE OR ID # 079	QRI# WA0311900	TIME POLICE DIS	SPATCHED 11:56 AM	TIME POLICE ARRIVED 12:09 PM
DADT D				





CORRECTION

F257201

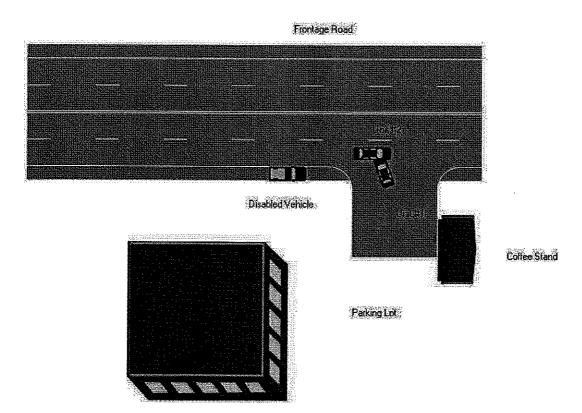
CASE#	13-0171

REPORT	NO.	E25/2	_

		2000						
NAME (LAST, FIRST, MIDDLE INITIAL) ELLIS JR	IDDITIONAL PERS RICHARD	ONS INVOLV	ED (PASSEN	BERS AND/O	RWITNESSE	S ONLY)		
ADDRESS & PHONE # 2111 PARK DR LAKE \$TI	EVENS WA				SEX M	D.O.B. MMDDYYYY <b>07</b>	_ 14	_ 2002
PASSENGER WITNESS UNIT # 2	SEAT 11	AIRBAG 2	RESTR. 4	EJECT	HELMET USE	INJURY CLASS 1	NATURE	OF INJURIES
NAME (LAST, EIRST, MIDDLE INITIAL). MEARNE	JOSH M							
ADDRESS & PHONE # 7410 10TH ST SE LAKE	STEVENS WA 9825	8 4259716655			SEX M	D.O.B. MMDDYYYY	_ 03	_ 1991
PASSENGER [] WITNESS [V] UNIT #	SEAT POS	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY GLASS	NATURE	OF INJURIES
NAME (LAST FIRST, MIDDLE INITIAL)								
ADDRESS & PHONE #					SEX	D.O.B. MMDDYYYY	]-[	]-[
PASSENGER WITNESS UNIT.#	SEAT POS.	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY GLASS	NATURE	OF INJURIES
		Annual Company of the	ARRATIV					
Unit #2 was traveling north who had just pulled out of parked on the northbound	Chevron, m	aking a le	eft turn o	ut of the	parking	lot. There		
Unit #2 sustained reportal	ole right pas	senaer da	amage					
One //2 Subtained reportati	olo rigiti pas	ochgor ac	arage.					
	•							
			•					
•								
								*
•								
CERTIFY (DECLARE) UNDER PENALTY OF PERJ	URY UNDER THE LA	VS OF THE STAT	E OF WASHIN	GTON THAT TI	HE FOREGOIN	IG IS TRUE AND C	ORRECT. (RO	CW 9A.72.085)
BOB SUMMERS			07-16-13	04:56 PM				

INVESTIGATING OFFICER'S SIGNATURE UNIT OR DIST. DET PLACE SIGNED DATED 7/17/2013 2:32:10 PM

BOB SUMMERS 079 TIME POLICE ARRIVED 12:09 PM BADGE OR ID# 079 ORI# TIME POLICE DISPATCHED 11:56 AM WA0311900





Chevron Gas Station

## LAKE STEVENS POLICE DEPARTMENT

**VICTIM/WITNESS STATEMENT** 

	CASE NUMBER 3-0/76							
VICTIM / WITNESS								
NON- DISCO NAME (LAST FIRST MIDDLE) AND C R. W.	ACE ETH SEX DOB 64/95 ASE SS 35 DAY 200							
STREET ADDRESS SOPER HILL ID CITY	ave stevens was 200 20 RES. STATUS							
HOME PHONE CELL PHONE 425	320-7170 PLACE OF EMPLOYMENT AM							
WORK PHONE EMAIL ADDRESS	va Ce badesons.009							
I, MYON JOLOGON DID NOT GRANT, NOR ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPE PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM ACTIONS COMMITTED.	TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT FRTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS A, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH							
I was Pulling out	of the ohs station							
awing left and o	1 truck was blocking							
My Vein therefore	I did not see the							
car conina and	hit the Car.							
J								
·								
CERTIFY (OR DECLARE) UNDER PENALTY OF PERILIRY LINDER THE LAWS O	F THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT							
	ATESIGNED COCATION SIGNED OF THE TOTAL SIGNED							
	ATE SIGNED LOCATION SIGNED							

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE\_\_\_OF\_\_\_

LAKE STEVENS POLICE DEPARTMENT **VICTIM/WITNESS STATEMENT CASE NUMBER** VICTIM / WITNESS RACE W NON-NAME (LAST, FIRST MIDDLE) JAMES DISCI STREET ADDRESS **CELL PHONE** PLACE OF EMPLOYMENT SAME WORK PHONE **EMAIL ADDRESS** SAnt , DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED. WHEN

I CERTIFY OR DECLARE UNDER PENALTY OF PERJURY UNDER TH	HE LAWS OF THE STATE OF WASHING	TON THAT THE FOREGOING IS TRUE AND CORRECT
SIGNATURE:	DATE SIGNED	LOCATION SIGNED AND RED TO
OFFICER/NUMBER:	DATESIGNED	LOCATION SIGNED
"The Lake Staneys Bolice Department is committed to a Coming	1	

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education'

Incident History for: #SS13015921
Case Numbers: \$SS13001716 07/16/13 Entered 11:55:08 BY SPCT08 SP0137 07/16/13 Dispatched 11:56:15 BY SPDP17 SP0147 07/16/13 Enroute 11:56:15 Onscene 07/16/13 12:09:26 Closed 07/16/13 12:30:24 Initial Type: ACC Initial Alarm Level: Final Alarm Level: Type: ACC Final (ACCIDENT, NON-INJURY OR UNKNOWN) Pri: 2 Dispo: H Police BLK: SS002 Fire BLK: AG1518 Map Page: 377E-7 Group: SS1 Beat: WEST Src: T Loc: 831 FRONTAGE RD , LKS -- CHEVRON , LKS btwn 4 ST NE & N DAVIES RD (V) Loc Info: Name: JACOBSEN, ANNA Addr: Phone: 4253207126 /1155 (SP0137) **ENTRY** , CC 2 VEHS NON INJ, NON BLKING. /1155(SP0147) **AGCADV** , BCST NAM: JACOBSEN, ANNA, PHO: 4253207126, /1155(SP0137) SUPP TXT: PULLED INTO UNION BANK BRO 2011 HONDA CIVIC VS SIL HONDA CIVIC /1156(SP0147) **AGCADV** , 1912 SS1912 **#SS79** SUMMERS, SGT (ROBERT) /1156DISPER (SS79 ) \*ONSCNE /1209SS1912 SS1912 MDTVEH, ADC2143, , WA, , , , , , , , , , /1216REMINQ /1217REMINQ SS1912 MDTVEH, AGH4844, , WA, , , , , , SS1912 MDTWANT, LEWIS, DANIEL, J, 042958, M, , WA, , , , , , , , , , , , /1220REMINQ SS1912 MDTWANT, JACOBSON, ANNA, E, 050495, F, , WA, , , , , , , , , /1221REMINQ SS1912 \$SS13001716 SS1912 D/H /1222(SP0147) ASNCAS /1230CLEAR /1230 CLOSE SS1912